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Clark County Regional Support Network Policy Statement

Policy No.: CR05
Policy Title: Consumer Rights to an Administrative Hearing
Effective Date: September 01, 2004

Policy: CCRSN and its' sub-contractors shall encourage consumers and/or family members to utilize all levels of the CCRSN Grievance System (complaints and grievances and appeals) prior to filing for a request for an administrative hearing with the Washington Office of Administrative Hearings (OAH) in order to resolve differences at the lowest level possible. CCRSN and its contracted providers shall provide information to RSN-funded consumers about their rights to a State administrative hearing (also known as a fair hearing) and the procedures for requesting a hearing as described in these procedures.

Reference: WAC Chapters 388-865, 388-02, Washington Mental Health Division RSN contracts (Pre-paid Inpatient Health Plan and State Mental Health contracts- Exhibit N: Grievance System Template), CMS Waiver, 42 CFR 438 Subpart F: Grievance System, 45 CFR Health Insurance Portability and Accountability Act (HIPAA), CCRSN Policy and Procedures: CM05 Notice of Action, CR06 Consumer Rights to Appeal, and CR03 Consumer Complaints and Grievances

Procedure:

MEDICAID ENROLLEES

Rights to Request an Administrative (Fair) Hearing

1. Medicaid enrollees have the right to request the Department of Social and Health Services (DSHS) pre- hearing and administrative hearing processes when:
 - a) The enrollee believes there has been a violation of Washington Administrative Code;
 - b) CCRSN or its contracted providers have violated timeframes in the resolution of a grievance, or CCRSN of an appeal;
 - c) The consumer does not agree with CCRSN's resolution of his or her appeal;
 - d) CCRSN's disposition of a grievance is not favorable to the enrollee.
2. Medicaid enrollees may file a request for an expedited administrative hearing if he/she and/or representative believe the standard timeframe for resolution would jeopardize the enrollee's ability to maintain or regain maximum functioning.

Timeframes for Requesting an Administrative Hearing

3. Consumers may file a request for an administrative hearing within the following timeframes:

- a) At any time, if the enrollee believes there has been a violation of Washington Administrative code
 - b) Within 20 days of the date of receipt of an unfavorable disposition of an appeal by CCRSN or an unfavorable resolution of a grievance by CCRSN or its contracted providers
4. The entire grievance and/or appeal process must be completed within 90 days of the date the consumer filed the appeal or grievance with CCRSN, not including the number of days the enrollee took to subsequently file for a state administrative hearing.

Continuation of Benefits/Services during the Administrative Hearing Process

5. Medicaid enrollees may request that their mental health services continue during the administrative hearing process. CCRSN shall continue the enrollee's benefits under the following conditions:
- a) The enrollee requests an administrative hearing within the required timeframes described in this policy;
 - b) The request involves an appeal concerning the termination, suspension, or reduction of a previously authorized course of treatment
 - c) The services were requested by an authorized Community Mental health Agency;
 - d) The original period covered by the original authorization has not expired at the time of the request for continuation of benefits
 - e) The enrollee requests continuation of benefits
6. CCRSN must provide written notice to enrollees that request continued benefits that if the outcome of the final hearing decision is not resolved in the enrollee's favor and upholds CCRSN's action, CCRSN may request that the enrollee pay for services that were provided during the hearing process.

Reversed Resolutions of Appeals

7. If the state administrative hearing officer reverses the CCRSN decision to deny, limit, or reduce services that were not provided while an appeal was pending, CCRSN must authorize and provide the disputed services promptly, and as expeditiously as the consumer's mental health condition requires.
8. If the state administrative hearing officer reverses a decision to deny authorization of services and the consumer received the disputed services while the appeal was pending, CCRSN must pay for those services.

NON-MEDICAID CONSUMERS

Rights to Request an Administrative (Fair) Hearing- NON-MEDICAID CONSUMERS

9. Non-Medicaid consumers have the right to request the Department of Social and Health Services (DSHS) pre- hearing and administrative hearing processes when:

- a) The enrollee believes there has been a violation of Washington Administrative Code;
- b) CCRSN's or a contracted provider's disposition of a grievance that is not favorable to the consumer.

Timeframes for Requesting an Administrative Hearing- NON-MEDICAID CONSUMERS

- 10. Consumers may file a request for an administrative hearing within the following timeframes:
 - a) At any time, if the enrollee believes there has been a violation of Washington Administrative code
 - b) Within 20 days of the date of receipt of an unfavorable disposition of a grievance by CCRSN or its contracted providers.
- 11. The entire grievance and/or appeal process must be completed within 90 days of the date the consumer filed the appeal or grievance with CCRSN, not including the number of days the enrollee took to subsequently file for a state administrative hearing.

Notice Requirements and Requesting an Administrative Hearing

- 12. CCRSN contracted providers shall provide to RSN-funded consumers written notice and verbal explanation of their rights to request a state administrative hearing and how to do so including: current contact information for OAH, DSHS, the MHD and the Ombuds services at the time of intake and periodically thereafter and in written notice of disposition of a grievance. Notices shall be consistent with the rights and timeframes described in this policy and Washington Administrative code.
- 13. CCRSN shall provide to consumers written notice and verbal explanation of their rights to request a state administrative hearing and how to do so including: current contact information for OAH, DSHS, the MHD and the Ombuds services in the process of handling grievances, notices of action, appeals, both in verbal and written notices issued to consumers. Notices shall be consistent with the rights and timeframes described in this policy and Washington Administrative code.
- 14. CCRSN shall include provide information about the state administrative hearing process to all sub-contractors at the time they enter into a contract and require compliance with all related requirements as a condition of the contract.
- 15. CCRSN Ombuds Services shall be available to assist consumers throughout the administrative hearing process at no cost. Consumers may also have representatives of their choice involved in the process.

Record-keeping and Reporting Requirements

- 16. CCRSN shall maintain records of administrative hearings. Information about administrative hearings shall be tracked separately for Medicaid and non-Medicaid consumers for reporting purposes and shall include the following data:

- a) The number of hearings and the focus of concern;
- b) The timeframes within hearings were requested;
- c) The nature of the decisions;
- d) A summary and analysis of the implications of the data, including what measures may be taken to address undesirable patterns.

17. CCRSN shall report the number of administrative hearings for Medicaid and state-funded consumers to the Washington Mental Health Division twice annually, using the separate reporting forms provided in the Pre-paid Inpatient Health Plan contract (Exhibit N-PIHP) and State Mental Health Contract (Exhibit N-SMC).

18. CCRSN shall monitor quality of the processes related to actions through:

- a) Oversight that hearings occur in compliance with state and federal rules and within required timelines and retaliation does not occur;
- b) CCRSN on-site provider monitoring visits
- c) Aggregation of data and trends reported to the CCRSN Quality Management Committee for the purposes of quality monitoring and service improvement on a quarterly basis.

Approved By: Michael Piper
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